

DECLARATION, POWER OF ATTORNEY, AND PETITION**Attorney Docket No.: MGI-174****Page 1 of 2**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHODS AND APPARATUS FOR REPAIRING INOPERATIVE PIXELS IN A DISPLAY

the specification of which:

- ☒ is attached hereto
☐ was filed on _____ as United States Application Number _____ or
PCT International Application Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to be material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:

| | | | |
|----------|-----------|----------------------|----------------------------------------------------------|
| | | | Priority Claimed |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| (Number) | (Country) | Month/Day/Year Filed | |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| (Number) | (Country) | Month/Day/Year Filed | |

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

(Application Number)

(Filing Date)

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s); or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

**U.S. Parent Application
or PCT Parent Number**

**Parent Filing Date
(MM/DD/YYYY)**

**Parent Patent Number
(if applicable)**

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint: Barry R. Lipsitz, Registration No. 28,637 and Douglas M. McAllister, Registration No. 37,886, of the firm of Barry R. Lipsitz, Attorney at Law, 755 Main Street, Bldg. 8, Monroe, Connecticut 06468, Telephone (203) 459-0200, my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, power of attorney, and this petition.

Full name of sole or first inventor: Richard A. KEENEYInventor's Signature Richard A. KeeneY Date: 19 Dec 2000Residence: Minneapolis Minnesota Citizenship: U.S.A.
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(Post Office Address) (City) (State & Zip Code/Country)**Full name of second inventor: Farhad NOURBAKHS**Inventor's Signature Farhad Nourbakhs Date: 19-Dec-2000Residence: Apple Valley MN Citizenship: USA
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(Post Office Address) (City) (State & Zip Code/Country)**Full name of third inventor: Anthony CLARK**Inventor's Signature Anthony Clark Date: 19-Dec-2000Residence: Eagan Minnesota Citizenship: USA
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